

Proposal Cover Sheet (New and Existing Operators)

Applicant Information

COMPLETE THIS PAGE ONLY ONCE REGARDLESS OF THE NUMBER OF SCHOOLS PROPOSED.

Name of applicant organization: **Purposed Academy, Inc.**

Primary contact person: **Monica M. Hill**

Mailing address:

Street/PO Box: **PO Box 759**

City: **Newton**

State: **MS**

Zip: **39345**

Phone Number: Day: **(601) 678-9118**

Evening: **(601) 678-9118**

Email: **fmrshill@yahoo.com**

Names, roles, and current employment of all persons on applicant team (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Monica M. Hill	Middle School Special Education Teacher	Board President
LaToya Cobb	Lift for Life Academy, St. Louis, MO Home Engineer/Biblical Counselor	Vice President
Yvette Robson	Self-Employed, Biloxi, MS Case Manager and Service Coordinator	Community Relations Officer
Kevin Hill	Catholic Charities of Ft. Worth, Ft. Worth, TX Boom Operator	Treasurer
	United States Air Force, Scott Air Force Base, IL	

Do any of the following describe your organization, or the school/campuses proposed here?

- ☐ Seeks approval for multiple campuses under a single charter.
- ☐ Already operates schools elsewhere in the US.
- ☐ Will contract or partner with an education service provider. If yes, include the provider's portfolio in answering the below questions regarding pending applications and school openings.

If so, identify the provider:

- ☐ This provider already operates schools in this state or elsewhere in the US.

NOTE: If the applicant meets the definition of an existing operator, the applicant must complete the Existing operator application. If the applicant intends to contract with a third-party education service provider (ESP), the applicant must complete Addendum 3 for Education Service Providers. An ESP is any third-party entity that provides comprehensive education management services to a school via contract with the school's governing board.

Does this applicant team have charter school applications under consideration by any other authorizer(s) in the United States? ☐ Yes ☒ No

If yes, complete the table below, adding lines as needed.

State	Authorizer	Proposed School Name	Application Due Date	Decision Date

Does this applicant team have new schools or campuses scheduled to open in the United States in the next two school years? ☐ Yes ☒ No

Purposed Academy

If yes, complete the table below, adding lines as needed.

Planned School Name	City	State	Opening Date

Does this applicant team have new schools or campuses approved but scheduled to open in additional years?

☐ Yes ☒ No

If yes, complete the table below, adding lines as needed.

Authorizer	# of Schools	City(s)	State

School Information

COMPLETE THIS PAGE FOR EACH SCHOOL/CAMPUS INCLUDED IN THIS PROPOSAL. Duplicate as needed.

Proposed School/Campus Name		Grades served: year one	Grades served: capacity
Purposed Academy		5 th -6 th	5 th -11 th
Proposed Location			
School District: <i>Identify the school district where the charter school will be located.</i>		Newton Municipal School District	
Address of identified facility if applicable:			
Projected Demographic Information		%FRL: 88%	%SpEd: 16% %ELL: .4%
Model/Specialty (check all that apply)			
<input type="checkbox"/> Alternative	<input type="checkbox"/> Career and Technical Education	<input type="checkbox"/> Disability (list):	<input type="checkbox"/> Montessori
<input type="checkbox"/> Arts	<input checked="" type="checkbox"/> College Prep	<input type="checkbox"/> Language Immersion	<input type="checkbox"/> STEM
<input type="checkbox"/> Blended Learning	<input type="checkbox"/> Other (list):	<input type="checkbox"/> Military	

Proposed Principal/Head of School (if known)

Name of proposed candidate: _____

Current employment: _____

Phone Number: _____

Day: _____

Evening: _____

Email: _____

Campus Enrollment Projection:

Academic Year (specify)	Planned # of Students	Maximum # of Students	Grade Levels Served
Year one 2017-2018	72	80	5 th - 6 th
Year two 2018-2019	144	160	5 th -8 th
Year three 2019-2020	180	200	5 th -9 th
Year four 2020-2021	216	240	5 th -10 th
Year five 2021-2022	252	280	5 th -11 th
At Capacity	252	280	5 th - 11 th

Purposed Academy

LETTER OF INTENT

This letter of intent (LOI) serves to provide a formal notice to the Mississippi Charter School Authorizer Board (MCSAB) regarding our intention to submit a proposal for opening a charter school.

Name of applicant organization: Purposed Academy, Inc.
Primary contact person: Monica M. Hill
Mailing address:
Street/PO Box: P.O. Box 759
City: Newton State: MS Zip: 39345
Phone Number: Day: (601) 678-9118 Evening: (601) 678-9118
Email: fmrshill@yahoo.com

We plan to apply as a:

☒ New operator ☐ Existing operator ☐ Conversion operator

Do any of the following describe your organization, or the school/campuses you will propose?

- ☐ Seeks approval for multiple campuses under a single charter.
☐ Already operates schools elsewhere in the US.
☐ Will contract or partner with an education service provider.

If so, identify the provider:

☐ This provider already operates schools in this state or elsewhere in the US.

Provide the names of all members of the applicant team (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Monica M. Hill	Middle School Special Education Teacher	Board President
	Lift for Life Academy, St. Louis, MO	

Provide the names of all members of the proposed governing board of the school (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
LaToya Cobb	Home Engineer/Biblical Counselor	Board Vice President
	Self-Employed, Biloxi, MS	

Provide the names of all members of the proposed leadership team of the school (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Yvette Robson	Case Manager and Service Coordinator	Community Relations Officer
	Catholic Charities of Ft. Worth, Ft. Worth, TX	

Provide the names of all members of the proposed leadership team of the school (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Kevin D. Hill	Boom Operator	Treasurer
	United States Air Force, Scott Air Force Base, IL	

Purposed Academy	2017-2018	5 th -6 th	5 th -11 th
Proposed Location			
School District: <i>Identify the school district where the charter school will be located.</i>	Newton Municipal School District		

Model/Specialty <i>(check all that apply)</i>			
<input type="checkbox"/> Alternative	<input type="checkbox"/> Career and Technical Education	<input type="checkbox"/> Disability <i>(list)</i> :	<input type="checkbox"/> Montessori
<input type="checkbox"/> Arts	<input checked="" type="checkbox"/> College Prep	<input type="checkbox"/> Language Immersion	<input type="checkbox"/> STEM
<input type="checkbox"/> Blended Learning	<input type="checkbox"/> Other <i>(list)</i> :	<input type="checkbox"/> Military	

Proposed School Description	
Provide the mission statement of the proposed school.	We believe all students are created with purpose to make a positive impact in the world we live in, and a quality education is foundational to fulfilling that purpose.
In 100 words or less, briefly describe the instructional focus of the proposed school.	Purposed Academy is a college preparatory school. Our primary focus is to ensure that our students have the required tools to enter into post-secondary education successfully. As we expand into the high school grades, we will create a strong academic base at the middle school level. We will develop a rigorous curriculum that is delivered with aligned objectives, instructional activities, and assessments to guide effective learning. We will also implement the use of differentiated instruction and RTI to actively identify and close learning gaps to ensure students' educational needs are met.

Certification

We understand that upon receipt of this letter and accompanying documentation, the MCSAB will evaluate our organization and applicant team against the legal eligibility requirements to determine whether we are eligible to hold a charter in the state of Mississippi.

We further understand that in order to be considered in this RFP cycle, we must submit a complete proposal by 3pm CST on May 10, 2016.

I certify that I have the authority to submit this LOI and that all information contained herein is complete and accurate, realizing that any misrepresentation could result in disqualification from the application process. The person named as the contact person for the application is so authorized to serve as the primary contact for this application on behalf of the organization.

Monica M. Hill, Board President
Name, Role with Applicant Organization

Monica M. Hill
Signature

3/7/2016
Date